

NORTH CAROLINA STATE BOARD OF ELECTIONS AND ETHICS ENFORCEMENT

2018 STATEMENT OF ECONOMIC INTEREST

919-814-3600

www.ncsbe.gov/Ethics/SEI

COMPLETE THIS FORM AND MAIL SIGNED, ORIGINAL TO STATE ETHICS COMMISSION, 1324 MAIL SERVICE CENTER, RALEIGH, NC 27699-1324

FILER'S NAME	E (FIRST, MIDDLE, LAST)					
Prefix	First Name	Middle Nan	ne	Last Name		Suffix
Mr.	Milton	Frederick		Fitch		Jr.
CURRENT EMPLOYER			JOB TITLE			
State of NC (General Assembly)			State 3	Senator		
NATURE OR TYPE OF BUSINESS						
Legislative						
REASON FOR FILING (SELECT ALL THAT APPLY)						
STATE GOVERNMENT JOB (Specify Agency)			BOARD/COMMISSION (List complete name of all State boards on which you are serving or are being considered)			
JUDICIAL OFFICER (Specify Office)		LEGISLATOR (Specify House or Senate)				
			Senate	2		

A. Do other immediate fan ✓ Yes ☐ No	nily members reside in you	r household?		
When used throughout this	s form, the term Immediat	e family includes your spou	use (unless legally separate	d). It also includes
· ·		use's children, grandchildr		
spouses of each of those pe	ersons) who reside in you	household.		
		nors in your household. A	•	years old. Minors are
FULL NAME OF ADULTS &	RELATIONSHIP	EMPLOYER	JOB TITLE	NATURE OF BUSINESS
EMANCIPATED MINORS				Desirvess
Ernestine L. Fitch	Sister	Retired Physician	n/a	n/a
Christine L. Fitch	Sister	Retired College Professor	Chairman of Board of Education of Wilson County	n/a
		nors in your household bel		
INITIALS FOR UNEMANCIPATED CHILDREN	RELATIONSHIP	EMPLOYER	JOB TITLE	NATURE OF BUSINESS
PROPERTY INTEREST	S			

Owner of Real Estate	% Ownership Interest	Location by City	Location by County
elf: 603 East Nash Street	100	Wilson	Wilson
elf: 511 South Douglas Street	100	Wilson	Wilson
elf: 1541 Beverly Road	100	Rocky Mount	Edgecombe
elf: 615 East Nash Street	100	Wilson	Wilson
elf: 600 East Green Street	100	Wilson	Wilson
elf: 1203 Toisnot Ave.	100	Wilson	Wilson
elf: 906 Faison Street	100	Wilson	Wilson
elf: 531 Barnes Street	100	Wilson	Wilson
elf: 600 South Lodge Street	100	Wilson	Wilson
elf: 606 South Lodge Street	100	Wilson	Wilson
elf: 19 AC Peacock Road	100	Lucama	Wilson
elf: 516 South Lodge Street	66.67	Wilson	Wilson
elf: 510 South Lodge Street	100	Wilson	Wilson
elf: 612 South Lodge Street	100	Wilson	Wilson
elf: 509 South Douglas Street	100	Wilson	Wilson
B. Lease or rent real estate or Yes ☑ No	personal property to or from the	State of North Carolina with a ma	rket value of \$10,000 or mor
Name of Lessor	Name of Lessee (Renter)	If Real Estate, Location by City & County	If Personal Property, Des

2. At any time during $\underline{2016}$ or $\underline{2017}$, did yo	u, your spouse, or mem	bers of your immediate	e family sell to or buy from the State of
North Carolina personal property with a ma	rket value of \$10,000 o	or more?	
☐ Yes ☑ No			
Name of Purchaser	Name o	of Seller	Type of Property
FINANCIAL INTERESTS			
3. As of <u>December 31, 2017</u> , did you, your	spouse, or members of	your <u>immediate</u> family	own any of the following financial interests
valued at \$10,000 or more? LIST EACH C	OMPANY INDIVIDU	ALLY	
A. Stock in a publicly owned company?			
☐ Yes ☑ No			
Do not list ownership interests in	a widely held investmen	nt fund (including mutu	al funds, regulated investment companies,
_ _	•		ts assets are widely diversified; and (ii)
•	•	• •	•
•	-	control the assets held i	n the mutual fund, investment company, or
pension or deferred compensation	pian.	Enll Name of C	ommoner (Do mot use a tiplean semakal)
Owner of Interest		Full Name of Co	ompany (Do not use a ticker symbol)
B. Stock Options in a company or busine	ess?		
☐ Yes ☑ No			
Owner of Stock Option	on	Full Name of Co	ompany (Do not use a ticker symbol)
C. Interests in a non-publicly owned con	npany or business entity	(including interests in	sole proprietorships, partnerships, limited
partnerships, joint ventures, limited liability	companies, limited lia	bility partnerships, and	closely held corporations)?
☐ Yes ☑ No If "No", proceed to que	stion 4.		
Owner of Interest		Name of	Company or Business Entity

C (1). For each non-publicly owned con	npany or business entit	y (the "primary compa	ny") identified in question 3.C above,
please list the names of any other companies	s or business entities in	which the primary cor	mpany owns securities or equity interests
valued at over \$10,000, if known.			
Non-Publicly Owned Company or Bu Primary Company)	siness Entity (the	Other Companies Sec	in which the Primary Company Owns urity or Equity Interests
☐ None or Not Known			
C (2). If you know that any company or	•		·
business contracts with the State of North Co	•		-
Name of Company or Business Entity		Description of	of Business Activity with the State
☐ None or Not Known			
4. As of <u>December 31, 2017</u> , were you, your value of \$10,000 or more that was created, e Do not list assets held in blind trusts. <u>See 20</u> ☐ Yes ✓ No	established, or controlle	ed by you?	
Name and Address of Trustee	Description	of the Trust	Your Relationship to the Trust
			-
5. As of <u>December 31, 2017</u> , did you, your sexcluding the mortgage on your primary per loans and intra-family debt. ✓ Yes ☐ No	_	·	
Name of Debtor (You, Spouse, Immedia	te Family Member)	Type of Credito	or (Commercial Bank, Credit Union,
Self: 603 East Nash Street		Individual: G.k. Butter	Individual, etc.)
Sen. 003 East Ivasii Sueet		marviduai. G.K. Dullei	meid
Self: 1203 Toisnot Ave.		Ocwen Financial	

		\$5,000 received by you, your spot government retirement, profession	· ·
dividends, rental income, busine	ess income, and other types of inco	ome required to be reported on you	ar State and federal tax returns.
Do <u>not</u> include income receive	d from the following sources:		
Capital gains	Federal government ret	irement	
Military retirement	► Social security income/S	SDI	.
Recipient of Income	Name of Source	Type of Business/Industry	Type of Income
☐ I had no reportable income ov	ver \$5,000 in 2017.		
Self	Grand Lodge	Brotherhood	Stipend
Ernestine Fitch -Sister	Private Practice	Practitioner	Salary
Self	Property	Rental Property	rental income
Self	Judicial Court System	Judge	Salary
Christine Fitch -Sister Board of Education of Wilson County		Educational	Retirement
PROFESSIONAL AND CIVIO	C RELATIONSHIPS		
7(a). <u>During 2017</u> , were you, yo	our spouse or members of your imi	nediate family a director, officer, §	governing board member,
employee, independent contract	or, or registered lobbyist of a nonp	profit corporation or organization of	operating in the State of North
Carolina primarily for religious,	charitable, scientific, literary, pub	olic health and safety, or education	al purposes?
☐ Yes ☑ No If "No", proc	eed to question 8.		
	s or entities, or entities created by ns of which you are a mere member	a political subdivision of the State	
Name of Person	His/Her Position	Name of Nonprofit Corporation or Organization	Nature of Business or Purpose of Organization
			J
		business with the State of North (
		known or with which due diligenc	
Name of Nonprofit Cor	poration or Organization	Describe State Busin	ness or State Funding
☐ None or Not Known			

Please answer the following question as it pertains to the following board/agency:					
		Sen	ate		
8. During 2017, were you, your sp	pouse, or n	nembers of your immed	liate family a director,	officer, or g	governing board member of any
society, organization, or advocacy	y group wi	th an interest in matters	over which your agen	cy or board	may have jurisdiction?
☐ Yes ☐ No ☑ Legislator/Judicial Officer - You are not required to complete this question if you are filing because you are a					
· · · · · · · · · · · · · · · · · · ·		fficer or you are filing	•	•	ou are fining because you are a
legislator of a	a judiciai o	incer or you are ming	as an appointee to those	e offices.	
Do not list organizations	s of which	you are only a member	(not serving in a leade	rship role).	
Name of Person Name of Society,			Organization or Leadership Position (Director, Office		
		Advocac		Board Member)	
9(a). List the name of each compa	•	•	· ·		
was an employee, director, office					_
Name of Person	Rela	tionship to Filer	Name of Comp	any	Role of Person
✓ No Business Associations					
9(b). If you know that any compa	ny or busi	ness entity listed in 9(a)	above had any materia	al business	dealings or business contracts
with the State of North Carolina of	•	· ·	·		
	n was iegi	nated by the State as of	<u>December 31, 2017, p</u>	iovide a bi	ici description of that business
activity.	au Duaina	aa E4:4	Description	f D	A attacker mith the State
Name of Company	or Busine	SS Entity	Description of Business Activity with the State		
✓ Not applicable (No entities list	ed on #9a)	□ No relationship / N	Not known		

	icer/State Attorney	h you or the law firm with w	hich you are affiliated has earned legal fees
of more than \$10,000 during 20	<u>17.</u>		
☐ Administrative	Admiralty	☐ Corporate	☐ Criminal
☐ Decedent's Estates	☐ Environmental	☐ Insurance	□Labor
Local Government	Real Property	Securities	□Tax
☐ Tort litigation (including negligence)	Utilities Regulation	Other category not l	isted.
11. <u>During 2017</u> , were you a lice member of a professional associ ☐ Yes ☑ No	•	• • • • • • • • • • • • • • • • • • • •	vide consulting services individually or as a
	Business	Nati	ure of Services Rendered
Please answer the following que	_	Senate	
12. Are you or your employer, y			
• <u>Licensed by</u> the State board of	r employing entity with whic	h you are or will be associate	ed or
• Regulated by the State board	or employing entity with whi	ch you are or will be associa	ted or
• Have a business relationship	with the State board or emplo	ying entity with which you a	are or will be associated?
legislator or		• • •	nestion if you are filing because you are a Helpful Tips) or you are filing as an
Name of Person	Name of Er	nployer (if applicable)	Type of Relationship (Licensing, Regulatory, Business)
	'		

☐ Yes ☑ No				
Name of Lobbyist	Lobbyist's Principal	Date of Registration	Registration Expiration	
OTHER DISCLOSURES				
14. During any calendar quarter	r in 2017 (but only the time period a	after you were appointed, employe	ed or filed or were nominated as a	
candidate), did you	` • •			
• receive any gift(s) exceeding	\$200 per quarter from a person or g	group of persons acting together, a	and	
		_	_	
• when both you and those pers	son(s) were outside North Carolina	at the time you accepted the gift(s		
	son(s) were outside North Carolina ircumstances that would lead a reas			
				
• the gift(s) were given under c ☐ Yes ☑ No		onable person to conclude that th		
 • the gift(s) were given under c ☐ Yes ☑ No Do not report gifts given 	ircumstances that would lead a reas	onable person to conclude that th	ey were given for lobbying?	
 • the gift(s) were given under c ☐ Yes ☑ No Do not report gifts given 	ren by members of your extended fat have previously been reported by	onable person to conclude that th	ey were given for lobbying?	
 the gift(s) were given under c Yes ✓ No Do not report gifts giv Do not report gifts that 	ren by members of your extended fat have previously been reported by	onable person to conclude that th	ey were given for lobbying?	
 • the gift(s) were given under c ☐ Yes ☑ No Do not report gifts giv Do not report gifts tha Report for Exempted I 	ren by members of your extended fat thave previously been reported by Persons." Name and Address of	onable person to conclude that the mily. you to the Department of the Secretary	ey were given for lobbying? retary of State on the "Expense	
 • the gift(s) were given under c ☐ Yes ☑ No Do not report gifts giv Do not report gifts tha Report for Exempted I 	ren by members of your extended fat thave previously been reported by Persons." Name and Address of	onable person to conclude that the mily. you to the Department of the Secretary	ey were given for lobbying? retary of State on the "Expense	
 • the gift(s) were given under c ☐ Yes ☑ No Do not report gifts giv Do not report gifts tha Report for Exempted I 	ren by members of your extended fat thave previously been reported by Persons." Name and Address of	onable person to conclude that the mily. you to the Department of the Secretary	ey were given for lobbying? retary of State on the "Expense	

Please answer the following ques	stion as it pertains to the following Sen		
15. During 2017 (but only the tin			re nominated as a candidate) did you
	eding \$200 from a person or group		
• those person(s) were outside N			_
•	-	hin" is a grant-in-aid, eit	her direct or indirect, to attend a
Ť.	r event, including tuition, travel,	•	
	cer - You are not required to comp er appointee.	plete this question if you are	e a judicial officer or you are filing as a
 Do not report gifts that Report for Exempted Per 		you to the Department of the	he Secretary of State on the "Expense
•	ired to report scholarships paid by s a member or participant or an aff		organization of which the legislator or
Date of Scholarship	Name and Address of Donor(s)	Describe Event	Estimated Market Value
Di	4''4	1 1/	
Please answer the following ques	stion as it pertains to the following Sen		
16. Were you appointed or are yo			y the Governor or another Council of
State member?			
Council of State members are:			
• Governor	• Lt. Governor	• Secretary of	State
State Auditor	State Treasurer	Superintende	ent of Public Instruction
Attorney General	• Commissioner of Agr	riculture • Commission	er of Labor
• Commissioner of Insuranc	e		
☑ Yes □ No			
•	vou (NOT <u>immediate</u> family men r Council of State member who a		with a cumulative total of more than
			to, "any advance, conveyance, deposit,
	funds, loan, payment, gift, pledge		
Date	Amo	ount	Contributed to
☑ No contribution(s) with a cum	ulative total of more than \$1,000		

Please answer the following question as it pertains to the following board/agency:					
17. A	Senate				
17. Are you an appointee or prospective appointee to:					
a. the head of a principal state department (e.g. ca	abinet secretary) appointed	by the Governor;	Yes	☑ No	
or			If "No	", proceed to question	
b. a North Carolina Supreme Court Justice, Cour	18.	•			
or					
c. a member of any of the following boards:					
• ABC Commission					
 Coastal Resources Commission 					
 State Board of Education 					
 State Board of Elections 					
 Division of Employment Security 					
• Environmental Management Commission					
	• Industrial Commission				
Human Resources Commission					
• Rules Review Commission					
Board of Transportation ANG Part of Grant Control of Control					
• UNC Board of Governors					
Utilities Commission Wildlife Resources Commission					
Wildlife Resources Commission					
d. If so, were you appointed or are you being con	Yes	□No			
position by a Council of State member? Council	of State members are listed	in question 16.	If "No	", proceed to question	
			18.	, r	
e. If so, you must indicate whether during 2017 y	nembers) engaged	□ Voc	□No		
in any of the following activities with respect to	•		103	□1 10	
committee of the Council of State member who a					
	ppomied jou to jour puon	• position.			
 i. Collected contributions from multiple con contributions, and transferred or delivered the or committee? Contributions are defined in or 	nose collected contributions	f such multiple to the candidate			
ii. Hosted a fundraiser at your residence or p	place of business?		□Yes	□No	
iii. Volunteered for campaign-related activities, which include, but are not limited to, phone banks, event assistance, mailings, canvassing, surveying, or any other activity that advances the campaign of a candidate?				□No	
18. Have you ever been convicted of a felony for whi	ch you have not received ei	ither: (i) a pardon of	innoce	nce: or (ii) an order of	
expungement regarding that conviction?	ou have not received of	mor. (1) a paraon or	11111000	are, or (ii) air order or	
☐ Yes ☑ No					
Offense	Date of Conviction	County of Con-	otion	State of Conviction	
Offense	Date of Conviction	County of Convid	CHOII	State of Conviction	
		_			

19. Are you aware of any other information that <i>you believe</i> may as compliance with the State Government Ethics Act?	ssist the State Ethics Commission in advising you concerning your
☐ Yes ☑ No If yes, please provide such information below.	
AFFIRMATION	
I affirm that the information provided in this Statement of Economic accurate to the best of my knowledge and belief.	ic Interest and any attachments hereto are true, complete, and
I also certify that I have not transferred, and will not transfer, any a disclosure while retaining an equitable interest.	sset, interest, or property for the purpose of concealing it from
I understand that my Statement of Economic Interest and any attack Confidential Form regarding Unemancipated Children) are public r	
I acknowledge that I have read and understand N.C.G.S. 138A-26 rand N.C.G.S. 138A-27 regarding providing false information:	regarding concealing or failing to disclose material information
§ 138A-26. Concealing or failing to disclose material informat A filing person who knowingly conceals or knowingly fails to statement of economic interest under this Article shall be guilt action under G.S. 138A-45.	
§ 138A-27. Penalty for false information. A filing person who provides false information on a statement the information is false is guilty of a Class H felony and shall	of economic interest as required under this Article knowing that be subject to disciplinary action under G.S. 138A-45.
☑ I Agree. It is my intention that this check box constitutes my ele information provided in this Statement of Economic Interest and best of my knowledge and belief.	
Filed Electronically	4/24/2018
Signature	Date
Milton Frederick Fitch, Jr.	
Printed Name	